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Fill in this information to identify your case	×
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (# known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

JUN 13 2016

JEFFREY P. ALLSTEADT, CLERK

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

(P	art 1: Identify Yourself		
	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.			
:	Write the name that is on your government-issued picture	LILLIAN	Lillian , O()
	identification (for example, your driver's license or	First name	First name
	passport).	Middle name	Middle name
	Bring your picture	GIBSON-DIXON	Widdle hame YOA
	identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	LILLIAN First name	то постоя в достоя на при на
	Include your married or maiden names.	Middle name HURT - GIBSON	Middle name
		Last name	Last name
		LILLIAN	
		First name	First name
		Middle name HURT	Middle name
		Last name	Last name
žiševičasi B			
٥.	Only the last 4 digits of your Social Security	xxx - xx - <u>1 5 4 9</u>	XXX - XX -
	number or federal	OR	OR
	Individual Taxpayer	Q 101	
905-00-	Identification number (ITIN)	9 xx - xx	9 xx - xx

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LILLIAN GIBSON-DIXON Debtor 1 Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names I have not used any business names or EINs. and Employer I have not used any business names or EINs. **Identification Numbers** (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name EIN EIN EIN 5. Where you live If Debtor 2 lives at a different address: <u>1042</u>8 S. INDIANA Number Street Number Street CHICAGO. 60628 State ZIP Code City State ZIP Code COOK County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send above, fill it in here. Note that the court will send any notices to you at this mailing address. any notices to this mailing address. Number Street Number Street P.O. Box P.O. Box City State ZIP Code City State ZIP Code Why you are choosing Check one: Check one: this district to file for Over the last 180 days before filing this petition, bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. ☐ I have another reason. Explain. I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

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Debtor	1

LILLIAN

GIBSON-DIXON

Case number (if known)_____

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м	h	ы	Н	ĸ.	ú	Н

Tell the Court About Your Bankruptcy Case

_	***************************************									
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7								
	are choosing to file under									
		☐ Chapter 11								
		☐ Cha	apter 12							
		☐ Cha	apter 13							
8.	How you will pay the fee	you sub	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
		☑ I ne App	ed to pay the fee in lication for Individual	otion, sign and attach the ents (Official Form 103A).						
		less pay	aw, a judge may, but than 150% of the off	is not required to, ficial poverty line thats). If you choose the	waive your fee, a at applies to you his option, you m	tion only if you are filing for Chapter and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.				
9.	Have you filed for bankruptcy within the	☑ No			***					
	last 8 years?	☐ Yes.	District	When	MM / DD / YYYY	Case number				
			District			Case number				
						Case number				
			District	When	MM / DD / YYYY	Case number				
).	Are any bankruptcy	☑ No								
	cases pending or being filed by a spouse who is	Yes.	Debtor			Palatianship to				
	not filing this case with	00.	District	When		Relationship to you Case number, if known				
	you, or by a business partner, or by an affiliate?				MM/DD/YYYY	Case number, it known				
			Debtor			Relationship to you				
			District			Case number, if known				
	Do you rent your	☑ No.	Go to line 12.							
	residence?	Yes.	Has your landlord obtainesidence?	íned an eviction judgi	ment against you a	and do you want to stay in your				
			☐ No. Go to line 12.							
						Against You (Form 101A) and file it with				

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Debtor 1	LILLIAN First Name Middle No	me	GIBSON-DIXO	DN	Cas	e number (if kno	own)		
	mode re	iiiie	Lest Name						
Part 3:	Report About Any	Busines	ses You Own as a !	Sole Propi	rietor				
	ou a sole proprietor	□ No	. Go to Part 4.						
busin	y full- or part-time ess?	✓ Yes	s. Name and location of	business					
A sole	proprietorship is a		GIBSON-DIXON	(LOTS O	FILIVA				
individ	ss you operate as an ual, and is not a		Name of business, if any	(20.00	, 201)	~~~			
separate legal entity such as a corporation, partnership, or LLC.			10428 S. INDIAN	Α		**************************************			
	nave more than one oprietorship, use a		***						
separa	te sheet and attach it petition.		CHICAGO,			IL.	60628		
to trus j	Jenion.		City		1900000	State	ZIP Code		
			Check the appropriate	hay to door	riha way hadin -				
			Health Care Busine						
			☐ Single Asset Real				0.3		
							·)))		
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))						
			None of the above	(as deinied	11 11 0.3.0. 9 10	1(0))			
Chapte Bankri	u filing under er 11 of the uptcy Code and u a s <i>mall busine</i> ss	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).							
debtor	•	🗹 No.	☑ No. I am not filing under Chapter 11.						
busines	efinition of <i>small</i> s debtor, see C. § 101(51D).		No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.						
		Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.							
art 4:	Boned W. Verr Commun	_ 4.4							
	weboit it tou Own o	r nave	Any Hazardous Proj	erty or A	ny Property Th	at Needs	Immediate Attention		
	own or have any	☑ No							
	y that poses or is to pose a threat	☐ Yes.	What is the hazard?						
of imm	inent and able hazard to						And the second s		
	able nazard to health or safety?			*****					
Or do y	ou own any								
	y that needs ate attention?		If immediate attention i	s needed, w	why is it needed?				
For exan	nple, do you own le goods, or livestock			ma	·				
that mus	t be fed, or a building Is urgent repairs?								
	•		Where is the property?						
			alo proporty:	Number	Street				
				City			State 7IP Code		

Debtor 1

LILLIAN	
First Name	Middle Nam

GIBSON-DIXON

Case number (if known)	
------------------------	--

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing al	oou
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

L	J	J a	m	not	requ	sired	to	recei	ve	a	briefing	about
								ecaus				

Incapacity. I have a mental illness or a m

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debto	or 1	

LILLIAN
First Name Middle No.

GIBSON-DIXON

Case number (if known)____

Part 6: Answer These Que	estions for Reporting Purpos	ses						
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
,	No. Go to line 16b.✓ Yes. Go to line 17.							
	16b. Are your debts primar money for a business or in	rily business debts? Business debts vestment or through the operation of the	are debts that you incurred to obtain business or investment.					
	☑ No. Go to line 16c.☑ Yes. Go to line 17.							
	16c. State the type of debts you N/A	owe that are not consumer debts or bus	siness debts.					
17. Are you filing under Chapter 7?	☐ No. I am not filing under Ch	napter 7. Go to line 18.	nten States (4 egit 19 februari 2004) ann a stephing a 19 mailt de part of the stephing and a stephing and a stephing a 19 mailt de part of the stephing and a stephing and a stephing a 19 mailt de part of the stephing and a stephing and a stephing a 19 mailt de part of the stephing and a stephing a stephing and a stephi					
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	₩ No	er 7. Do you estimate that after any exen s are paid that funds will be available to	npt property is excluded and distribute to unsecured creditors?					
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000					
19. How much do you estimate your assets to be worth?	■ \$0-\$50,000 ■ \$50,001-\$100,000 ■ \$100,001-\$500,000 ■ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion					
20. How much do you estimate your liabilities to be? Part 7: Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion					
For you	I have examined this petition, and correct.	i I declare under penalty of perjury that ti	he information provided is true and					
	If I have chosen to file under Cha	pter 7, I am aware that I may proceed, if understand the relief available under eac	eligible, under Chapter 7, 11,12, or 13 h chapter, and I choose to proceed					
	If no attorney represents me and this document, I have obtained ar	I did not pay or agree to pay someone wind read the notice required by 11 U.S.C.	he is not an attorney to help me fill out § 342(b).					
		the chapter of title 11, United States Co						
	understand making a false state with a bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1519, an	In fines up to \$250,000, or imprisonmen	noney or property by fraud in connection t for up to 20 years, or both.					
	Signature of Debtor 1	7- Nexan ×	of Debtor 2					
	Executed on AMM / DD /YY	Executed of						

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Debtor 1	LILLIAN First Name Middle N	GIBSON-DIXON Last Name	Case number (if known)_				
represent	attorney, if you are ted by one not represented	available under each chapter for which the per the notice required by 11 U.S.C. § 342(b) and.	etition, declare that I have int le 11, United States Code, a son is eligible. I also certify t in a case in which & 707/h/2	formed nd have hat I ha	the e ex	debt plain delive	or(s) about eligibility ed the relief ered to the debtor(s)
by an attorne need to file th	orney, you do not	knowledge after an inquiry that the information	The schedules filed with the	e petiti	on is	s inco	orrect.
		Signature of Attorney for Debtor	Date	MM	/	DD	/ YYYY
		Printed name					
		Firm name					
		Number Street					
		City	State	ZIP Co			
			State	217 00	oae		
		Contact phone	Email address			~	
		Bar number	Clat-				
		Sa range	State				

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Debtor 1

LILLIAN

Middle Name

GIBSON-DIXON

Last Name

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

	Are you aware that filing for bankruptcy is a serious actionsequences? No Yes	ion with long-te	erm financial and legal
	Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprisor No Yes	and that if you ned?	r bankruptcy forms are
	Did you pay or agree to pay someone who is not an atto No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Decl		
	Attach Dankiblicy Fellion Preparer's Notice, Deci	aradon, and on	gnature (Onicial Form 119).
K	By signing here, I acknowledge that I understand the rist have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	ks involved in that filing a bank	filing without an attorney. I kruptcy case without an
K	By signing here, I acknowledge that I understand the rist have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I signature of Debtoo 1	ks involved in that filing a bank	filing without an attorney. I kruptcy case without an y handle the case.
•	By signing here, I acknowledge that I understand the rist have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	ks involved in the nat filing a bando not properly	filing without an attorney. I kruptcy case without an y handle the case.
	By signing here, I acknowledge that I understand the rist have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I beginned the property of I beginned to the I	ks involved in the nat filing a bando not properly	filing without an attorney. I kruptcy case without an y handle the case.
	By signing here, I acknowledge that I understand the rischave read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I signature of Debto 17	ks involved in a nat filing a ban do not properly Signature of De	filing without an attorney. I kruptcy case without an y handle the case.
	By signing here, I acknowledge that I understand the rischave read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I beginned the property of I beginned the property of I beginned to Debto 1/Date Contact phone	ks involved in a nat filing a bando not properly Signature of De Date Contact phone	filing without an attorney. I kruptcy case without an y handle the case.

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ebtor 1	LILLIAN		GIBSON-DIXON
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filing)	First Name	Middle Name	Last Name
nited States I	Bankruptcy Court for	the: Northern District of I	Ilinois
ase number			
	(If known)		

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B..... 0.00 1b. Copy line 62, Total personal property, from Schedule A/B..... 2,100.00 1c. Copy line 63, Total of all property on Schedule A/B 2,100.00 Part 2: **Summarize Your Liabilities** Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D...... -400.003. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 0.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 150,304.00 149,904,00 Your total liabilities Part 3: **Summarize Your Income and Expenses** 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I 1,186,00 5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J 2,230.00

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Document

Debtor 1		GIBSON-DIXON	Case number (if known)
	First Name Midd	e Name Lest Name	++++ // ((// (// (// (// (// (//

	First Name Middle Name Last Name State Sta	
P	art 4: Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?	
	☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ☐ Yes	
7.	What kind of debt do you have?	
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.	
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this information to identify your case and t	his filing:		
Debtor 1 LILLIAN GIBSON	N-DIXON		
First Name Middle Name	Last Name		
Debtor 2 (Spouse, if filling) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District	of Illinois		
Case number			
			☐ Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Proper	ty		12/15
responsible for supplying correct information. If write your name and case number (if known). Ans	ms. List an asset only once. If an asset fits in more plete and accurate as possible. If two married peop more space is needed, attach a separate sheet to t swer every question. J. Land, or Other Real Estate You Own or Ha	le are filing together, be his form. On the top of	
 Do you own or have any legal or equitable inter No. Go to Part 2 	est in any residence, building, land, or similar pro	perty?	
Yes. Where is the property?			
and the blocking property ;	What is the property? Check all that apply.		
1.1. 10428 S. INDIANA	Single-family home	the amount of any secur	claims or exemptions. Put ed claims on Schedule D:
Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Cla	ims Secured by Property.
	Condominium or cooperative Manufactured or mobile home	Current value of the	
	- D Land	entire property?	portion you own? \$ -400.00
CHICAGO, IL 60628	investment property	Ψ	Ψ
City State ZIP Code	Timeshare Other	Describe the nature interest (such as fee the entireties, or a li	simple, tenancy by
	Who has an interest in the property? Check one.	fee simple	, a a a a a a a a a a a a a a a a a a a
СООК	■ Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	Check if this is co	Ommissihi propositi
	At least one of the debtors and another	(see instructions)	онничних ргорену
	Other information you wish to add about this if	tem, such as local	
(formulation and the control of the	nronosty idontification manches.		
If you own or have more than one, list here:	What is the property? Check all that apply.	Algania de la casa de	en e
NIA	Single-family home	Do not deduct secured cli- the amount of any secure	aims or exemptions. Put
1.2 N/A Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	ms Secured by Property.
chool address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	Land Investment property	\$0.00	\$ 0.00
City State ZIP Code	Timeshare	Describe the nature of	of your ownership
City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
	Debtor 1 only		
County	Debtor 2 only	,	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is co	mmunity property
		(see instructions)	
	Other information you wish to add about this iter property identification number:	n, such as local	

Case 16-19315 Doc 1 Filed 06/13/16 Entered 06/13/16 11:30:33 Desc Main GIBSON-DROCHMENT Page 12 of 44 Debtor 1 Case number (if know Middle Name What is the property? Check all that apply. Do not deduct secured claims or exemptions, Put N/A Single-family home the amount of any secured claims on Schedule D: 13 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home 0.00 ☐ Land 0.00 ☐ Investment property City State ZIP Code ☐ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles M No ☐ Yes Who has an interest in the property? Check one. 3.1 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D. Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 ☐ Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model:

Year:

Approximate mileage:

Other information:

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see

Debtor 2 only

instructions)

Current value of the

0.00

portion you own?

Creditors Who Have Claims Secured by Property.

0.00

Current value of the

entire property?

Case 16-19315 Doc 1 Filed 06/13/16 Entered 06/13/16 11:30:33 Desc Main GIBSON-BREWMENT LILLIAN Page 13 of 44 Debtor 1 Case number (if known) Middle Name Who has an interest in the property? Check one. 3.3 Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 0.00 0.00 Check if this is community property (see instructions) Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D. Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: 0.00 0.00 Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories **2** No Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? ☐ Check if this is community property (see 0.00 0.00 instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. 4.2. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: entire property? portion you own?

instructions)

0.00

0.00

At least one of the debtors and another

Check if this is community property (see

Case 16-19315

GIBSON-DPROSHIMENT

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Debtor 1

LILLIAN

Middle Name

Case number (if known)

D		al or equitable interest in any of the following items?	portion	value of the /ou own? duct secured claims
			or exempti	
ъ.	Household goods and ful			
	No No	s, furniture, linens, china, kitchenware		
		IOUSE HOLD ITEMS	\$	1,000.00
7.	Electronics			
	conections, elec	radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music tronic devices including cell phones, cameras, media players, games		
	No		- margan, a	
	Yes. Describe	VS X 2 COMPUTER X 1 CELL PHONE X 2	\$	700.00
8.	Collectibles of value			
	Examples: Antiques and fig stamp, coin, or b	urines; paintings, prints, or other artwork; books, pictures, or other art objects; paseball card collections; other collections, memorabilia, collectibles		
	Yes. Describe		\$	0.00
9.	Equipment for sports and	hobbice		······································
	Examples: Sports, photogra and kayaks; carp	phic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes pentry tools; musical instruments		
	No No			
	Yes. Describe		\$	0.00
10	Firearms			
	· · · ·	otguns, ammunition, and related equipment		
	Yes. Describe		\$	0.00
11.0	Clothes		_	
	<i>Examples:</i> Everyday clothes □ No	, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe	SED CLOTHING, AULTS AND CHILDERN	\$	500.00
12.	lewelry			
į	Examples: Everyday jewelry, gold, silver	costume jewelry, engagement rings, wedding rings, heirtoom jewelry, watches, gems,		
	⊇ No		2	
	Yes. DescribeCC	OSTUME JEWELRY	\$	300.00
	lon-farm animals Examples: Dogs, cats, birds,			
	2 No			
	Yes. Describe		\$	0.00
4. A	ny other personal and hou	sehold items you did not already list, including any health aids you did not list		
	2 No			
	Yes. Give specific			0.00
	information		\$	0.00
5. A	dd the dollar value of all o	f your entries from Part 3, including any entries for pages you have attached	s	2,100.00

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GIBSON-DPOSHIMENT

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Debtor 1

LILLIAN First Name

Middle Name

Last Name

Case number (if known)

	ly legal or equitable interest in	any of the following?		portion yo	alue of the ou own? uct secured clair
16. Cash Examples: Money you	u have in your wallet in your he	me in a refer durantly to		•	
No No	a nave in your wallet, in your no	me, in a safe deposit box, and on hand when you	file your petition		
					0.00
			Cash:	\$	0.00
17. Deposits of money Examples: Checking, and other	savings, or other financial acco similar institutions. If you have r	unts; certificates of deposit; shares in credit unions nultiple accounts with the same institution, list each	s, brokerage houses, n.		
2 Yes		Institution name:			
	17.1. Checking account:	CHASE			0.00
	17.2. Checking account:			\$	0.00
	17.3. Savings account:	CHASE		\$	0.00
	17.4. Savings account:			\$	0.00
	<u>-</u>			\$	0.00
	17.5. Certificates of deposit:			\$	0.00
	17.6. Other financial account:			\$	0.00
	17.7. Other financial account:		711111111111111111111111111111111111111	\$	0.00
	17.8. Other financial account:			\$	0.00
	17.9. Other financial account:			\$	0.00
18. Bonds, mutual funds, Examples: Bond funds, No Yes	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts			
				\$	0.00
				\$	0.00
				\$	0.00
an LLC, partnership, a	tock and interests in incorpor and joint venture	ated and unincorporated businesses, including	g an interest in		
☑ No	Name of entity:	9	6 of ownership:		
Yes. Give specific information about			<u> </u>	\$	0.00
them			<u>)%</u> %	\$	0.00

0.00

0%

Debtor 1

Page 16 of 44
Case number (if known)

LILLIAN		GIBSON-DPROWIMENT
First Name	Middle Name	Last Name

☑ No				
Yes. Give specific information about	Issuer name: N/A			
them			\$	0.0
			\$	0.0
			\$	0.0
21. Retirement or pensio				
Examples: Interests in	IRA, ERISA, Keogi	h, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans		
✓ No ✓ Yes. List each				
account separately	. Type of account:	Institution name:		
	401(k) or similar pl	ian:	\$	0.00
	Pension plan:		Ψ	0.00
	IRA:		\$	0.00
	Retirement accoun	f*	\$	
	Keogh:		\$	0.00
	Additional account:		\$	0.00
	Additional account:		\$	0.00
22. Security deposits and Your share of all unused	prepayments	e made so that you may continue service or use from a company.		
Your share of all unused Examples: Agreements companies, or others	d deposits you have	e made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications		
Your share of all unused Examples: Agreements companies, or others	d deposits you have	e made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications		
Your share of all unused Examples: Agreements companies, or others	d deposits you have with landlords, prep	e made so that you may continue service or use from a company paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:		
Your share of all unused Examples: Agreements companies, or others	d deposits you have with landlords, prep Electric:	paid rent, public utilities (electric, gas, water), telecommunications	\$	0.00
Your share of all unused Examples: Agreements companies, or others	d deposits you have with landlords, prep Electric: Gas:	paid rent, public utilities (electric, gas, water), telecommunications	\$\$	0.00 0.00
Your share of all unused Examples: Agreements companies, or others	d deposits you have with landlords, prepared to the landlords of the landl	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$ \$	0.00
Your share of all unused Examples: Agreements companies, or others No	d deposits you have with landlords, prepared to the landlords of the landl	paid rent, public utilities (electric, gas, water), telecommunications	\$ \$ \$	0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others No	d deposits you have with landlords, prepaid rent:	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$	0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others No	d deposits you have with landlords, prepared to the landlords of the landl	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others No	d deposits you have with landlords, prepared to be seen	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others	d deposits you have with landlords, prepared the security deposit on Prepaid rent: Telephone: Water:	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture:	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others No Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: rental unit:	\$\$ \$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others No Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	paid rent, public utilities (electric, gas, water), telecommunications Institution name or individual:	\$\$ \$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00
Your share of all unused Examples: Agreements companies, or others No Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	Institution name or individual: rental unit: t of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00
No Yes	Electric: Gas: Heating oil: Security deposit on Prepaid rent: Telephone: Water: Rented furniture: Other:	Institution name or individual: rental unit: t of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$	0.00 0.00 0.00 0.00 0.00

0.00

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Debtor 1

GIBSON-DROWMent

Desc Main

L., I L.	LIM	I V	
-			

Case number (if known)

No No				
☐ Yes	Institution name and description. Separately file the records of any interests.11 U	S.C. 8.521/	o):	
	The second of any interests.	.5.0. 9 5216		0.00
	0.00		\$	0.00
			δ <u> </u>	0.00
			Φ	
25. Trusts, equitable or future exercisable for your bene	interests in property (other than anything listed in line 1), and rights or powers			
☑ No				
☐ Yes. Give specific		==20477744074747474	3	
information about them.			\$	0.00
26. Patents, copyrights, trade	marks, trade secrets, and other intellectual property	***************************************		
Examples: Internet domain	names, websites, proceeds from royalties and licensing agreements			
☑ No				
Yes. Give specific information about them.	0		· · · · · · · · · · · · · · · · · · ·	
anormation about them,			\$	0.00
27. Licenses, franchises, and				
Examples: Building permits,	exclusive licenses, cooperative association holdings, liquor licenses, professional lice	nses		
☑ No				
Yes. Give specific information about them				
mornadon about trem.	The same of the sa		\$	0.00
Money or property owed to yo	uz ilika kilika kilika kan kan ang kang kang kang kang kang			to the state of
	[4] 지금 10 10 12 12 12 12 12 12 12 12 12 12 12 12 12			value of the
			Dortion	vou own?
			Do not de	you own? educt secured
28. Tax refunds owed to you			Do not de	
28. Tax refunds owed to you No			Do not de	duct secured
☑ No ☐ Yes. Give specific inform			Do not de	duct secured exemptions.
☑ No	g whether Federal:	\$	Do not de claims or	duct secured exemptions.
☑ No☑ Yes. Give specific inform about them, includir	g whether returns State:	\$	Do not de claims or	0.00
No Yes. Give specific inform about them, includir you already filed the	g whether Federal: returns State	\$ \$	Do not de claims or	duct secured exemptions.
No Yes. Give specific inform about them, includir you already filed the and the tax years	g whether returns State:	\$ \$	Do not de claims or	0.00
No Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump	g whether returns Federal: State: Local:	\$	Do not de claims or	0.00
No Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump No	g whether returns State: Local: Sum alimony, spousal support, child support, maintenance, divorce settlement, proper	\$	Do not de claims or	0.00
No Yes. Give specific inform about them, includir you already filed the and the tax years Pamily support Examples: Past due or lump	g whether returns State: Local: State: Local: State: Local: State: Local:	\$	Do not de claims or	0.00 0.00 0.00
No Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump No	g whether returns State: State: Local: Sum alimony, spousal support, child support, maintenance, divorce settlement, proper stion	\$ ty settlemen	Do not de claims or	0.00 0.00 0.00
No Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump No	g whether returns State: Local: Sum alimony, spousal support, child support, maintenance, divorce settlement, proper stion	\$ ty settlemen	Do not de claims or	0.00 0.00 0.00
No Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump No	g whether returns	\$ ty settlemen: e:	Do not de claims or	0.00 0.00 0.00 0.00 0.00
No Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump No	g whether returns	\$ ty settlement e:	S	0.00 0.00 0.00
 ✓ No ✓ Yes. Give specific informabout them, including your already filed the and the tax years 29. Family support Examples: Past due or lump ✓ No ✓ Yes. Give specific informations. 	g whether returns State: State: Local: Sum alimony, spousal support, child support, maintenance, divorce settlement, proper stition. Alimony: Maintenance Support: Divorce settlement proper settlement prop	\$ ty settlement e:	Do not de claims or	0.00 0.00 0.00 0.00 0.00 0.00
No ☐ Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump ☑ No ☐ Yes. Give specific informs 30. Other amounts someone ov Examples: Unpaid wages, dis	g whether returns State: Local: Sum alimony, spousal support, child support, maintenance, divorce settlement, proper stion	ty settlemen: e: lement: tlement:	S	0.00 0.00 0.00 0.00 0.00 0.00
No ☐ Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support	g whether returns State: State: Local: Sum alimony, spousal support, child support, maintenance, divorce settlement, proper stition. Alimony: Maintenance Support: Divorce settlement proper settlement prop	ty settlemen: e: lement: tlement:	S	0.00 0.00 0.00 0.00 0.00 0.00
No ☐ Yes. Give specific inform about them, includir you already filed the and the tax years 29. Family support Examples: Past due or lump ☑ No ☐ Yes. Give specific informs 30. Other amounts someone ov Examples: Unpaid wages, dis	g whether returns State: Local: State: Local: State: Local: Alimony: Maintenance Support: Divorce sett Property set	ty settlemen: e: lement: tlement:	S	0.00 0.00 0.00 0.00 0.00 0.00

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GIBSON-DROSHMent Page 18 of 44 LILLIAN Deptor 1 Case number (if known) First Name Middle Name

31. Interests in insurance policies				
Examples: Health, disability, or life insural No	ce; health savings account (HSA); credit,	homeowner's, or renter's insurance		
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender	or refund value:
			\$	0.00
				0.00
			· •	0.00
32. Any interest in property that is due you If you are the beneficiary of a living trust, a property because someone has died. No	from someone who has died		· • • • • • • • • • • • • • • • • • • •	
☐ Yes. Give specific information	Photo / Allander 1 (1997) Allander 1 (1997)			
			\$	0.00
33. Claims against third parties, whether or Examples: Accidents, employment dispute No	not you have filed a lawsuit or made a s, insurance claims, or rights to sue		d	
Yes. Describe each claim			* 10 ⁴ 100 10	0.00
04.04			\$	0.00
34. Other contingent and unliquidated claim to set off claims ☑ No	s of every nature, including countercla	_		
Yes. Describe each claim				0.00
35. Any financial assets you did not already				
☐ No ☐ Yes. Give specific information	elefendensen av et 1919-1918 in som att hjer fott pleist i den av ett fott fott skrivet en en en et en et en e			
Co. Cive specific information			\$	0.00
36. Add the dollar value of all of your entries for Part 4. Write that number here	from Part 4, including any entries for	nages you have attached		0.00
The state of the field from the state of the			\$	0.00
Part 5: Describe Any Business-R	elated Property You Own or H	ave an interest in. List any r	eal estate	in Part 1.
37. Do you own or have any legal or equitabl				***************************************
No. Go to Part 6.	wassest warry basiness-related propi	erty :		
☐ Yes. Go to line 38.				
			Current value	af the
			portion you o	wn?
8. Accounts receivable or commissions you	already earned		or exemptions.	
No	alleady earlied			
Yes. Describe	100 - No. 100 - 10			
	ay that to be able to the second stripping of the second stripping are administrated as the second stripping of the second str		\$	0.00
Office equipment, furnishings, and suppl	es		1	
Examples: Business-related computers, software,	nodems, printers, copiers, fax machines, rugs, t	elephones, desks, chairs, electronic devices		
Yes. Describe	tendrama na nampa jak jakustusta maa panjas ji jihistoo maa a manja jajiji a kusta maja igang sijalik hiimida kaa ma aa ga jijiji	ny na aranamany, apiny a ny indrakanana ny mpiya Abiyan A arana a garapa Abiya arana may magaa yilaha akha ny mana g		
			\$	0.00

Entered 06/13/16 11:30:33 Case 16-19315 Doc 1 Filed 06/13/16 Desc Main Page 19 of 44 GIBSON-DROSHMENT LILLIAN Debtor 1 Case number (if known), Middle Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade **☑** No Yes. Describe.... 0.00 41. Inventory No No Yes. Describe.. 0.00 42. Interests in partnerships or joint ventures Yes. Describe..... Name of entity: % of ownership: 0.00 0.00 0.00 43. Customer lists, mailing lists, or other compilations No No ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 0.00 44. Any business-related property you did not already list ☑ No. Yes. Give specific information 0.00 0.00 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. Part 6: If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? ☑ No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals

☐ Yes.....

₩ No

Examples: Livestock, poultry, farm-raised fish

\$

0.00

Case 16-19315 Doc 1 Filed 06/13/16 Entered 06/13/16 11:30:33 Desc Main GIBSON-DRASHMent Page 20 of 44 LILLIAN Debtor 1 Case number (if known) Middle Name 48. Crops—either growing or harvested ☑ No Yes. Give specific information..... 0.00 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ Yes..... 0.00 50. Farm and fishing supplies, chemicals, and feed No ☐ Yes..... 0.00 51. Any farm- and commercial fishing-related property you did not already list No. ☐ Yes. Give specific information..... 0.00 \$ 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☑ No 0.00 ☐ Yes. Give specific information..... 0.00 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here 0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 400.00 56. Part 2: Total vehicles, line 5 0.00 2,500.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 0.00 62. Total personal property. Add lines 56 through 61. 2,500.00 Copy personal property total -> 2,500.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.....

2,100.00

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Fill in this infor				
Deptoi	LIAN	GIBSON-DIX	ON	
Debtor 2		die Name Last Name		
(Spouse, if filing) First		die Name Last Name		
_	ruptcy Court for the: Norther	n District of Illinois		
Case number (If known)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Check if this is a amended filing
				amended ining
Official For	m 106C			
Schedu	e C: The P	roperty You	Claim as Exemp	12/15
e as complete and sing the property	d accurate as possible. If you listed on Schedule A	two married people are filing to B: Property (Official Form 106	ogether, both are equally responsible for	supplying correct information.
pace is necata, m	l out and attach to this pa e number (if known).	ge as many copies of Part 2:	Additional Page as necessary. On the top	o of any additional pages, write
	•	ammt		
pecific dollar am	ount as exempt. Alterna	empt, you must specify the tively you may claim the ful	amount of the exemption you claim. C I fair market value of the property bei	One way of doing so is to state a
and abbitcable	sratorotà illitir 2011e ext	emptions—such as those fo	r health aids, rights to receive cortain	hanafite and tay avenue
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ould be infilted to	the applicable statutor	y amount.		
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Case 16-19315 Doc 1 Document Page 22 of 44 GIBSON-DIXON Case no

Debtor 1

LILLIAN First Name

Middle Name

Case number (if known)

Part 2:

Additional Page

on Schedule	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:		\$		
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4. List all secured digitis, if a dieditor has more man one secured claim, list the creditor congretative.	Fill in this before the state of	200a.no.n . ago 20 0			
Debtor 2 Shows the debt? Check one. This Note The					
Check if this is a secured by Property 12/15	Debiori				
United States Bankrupticy Court for the Northerm District of Illinois Case number Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are fitting together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, if lit out, number the entries, and attach it to this form. On the top of any stiditional pages, write your name and case number (if known). 10 or any creditions have claims secured by your property? 10 No. Check this took and submit this form to the court with your other schedules. You have nothing else to report on this form. 11 Or any credition have claims. If a creditor has more than one secured deain, list the creditor separately of each claim. If more than one creditor has particular claim. It is the other creditors in Part 2. One this death in the claim. If more than one creditor has particular claim. It is the other creditors are creditionally in Part 2. One of the death of the claim is the claim in alphabetical celer. Security of the creditor's rame. 2. List all secured claims. If no cet than one creditor has more than one secured death, list the other creditors in Part 2. One of the death of the claims is a particular claim. It is the other creditors are continued to the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If no cet than one creditor has more than one secured the other creditors are continued to the court with your other schedules. You have nothing else to report on this form. 2. List all secured claims. If no cet than one creditor has particular claim. It is the claims in Part 2. One the death of the death of the claims in a particular claim. It is the claims in Part 2. One the death of the death of the property that secures the claims. 2. Particular than the property that secures the claims. 3. 90,800.00 s 90,800.00 s 90,800.00 s 90,800.00 s 90,800.00 s 90,80	(0	Name			
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Number Street As of the date you file, the claim is: Check all that apply. COLUMBUS OH 43224 City State ZilP Code Who owes the debt? Check one. Mature of lien. Check all that apply. As of the date you file, the claim is: Check all that apply. Mature of lien. Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. As of the date you file, the claim is: Check all that apply. Check if this claim relates to a community debt As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Check if this claim relates to a community debt Check if this claim relates to a community debt As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Statutory lien (such as tax lien, mechanic's lien) Undernation filen. Check all that apply. Check if this claim relates to a community debt Check if this claim relates to a community debt	Creditor's Name		7	\$	\$ 400.00
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At least one of the debtors and another Under this claim relates to a community debt Under the debtors and another Other (including a right to offset)					
community debt		Judgment lien from a lawsuit			
community debt	☐ Check if this claim relates to a	Other (including a right to offset)			
Date debt was incurred	community debt				
Add the dollar value of your entries in Column A on this page. Write that number here: \$ -400.00		A CONTRACTOR DE LA CONT	???\$<*\#\#\#\#\#\#\#\#\#\#\#\#\#\#\#\#\#\#\		riantehene ur

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Document

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Debtor 1

LILLIAN

First Name

Middle Name Last Name **GIBSON-DIXON**

Case number (if known)

Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	s page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
NONE	Describe the property that secures the claim:	¢		
Creditor's Name		·	\$	\$
Number Street	-			
	As of the date you file, the claim is: Check all that apply.	and the state of t		
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
NONE	Describe the property that secures the claim:	et betom tikkilan kirakasar et de star star kirakar karakar starak starak et betar et betar et betar et betar e	artistika naturakan panya misunati nati mendikah balismini kan intermise konsisional kan interka	is rein intident simmissia yn rei gwetterfre i oristant a vedenneuw e e e
Creditor's Name		\$	\$\$	
	-			
Number Street				
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)			
	Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
NONE	Describe the property that secures the claim: \$	kontribur til en til en til govern fra er frem har et sem har til en skolen stelle fra skille til en skille ti Til en skille til en skill	and the second s	v vestori larettusto trastitura desendramente (vol)
Creditor's Name	proporty and coording the diam.		\$\$	
Number Street				:
	As of the date you file, the claim is: Check all that apply.			:
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only				
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			:
☐ Check if this claim relates to a	Other (including a right to offset)			:
community debt				1
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	in Column A on this page. Write that number here:			
	add the dollar value totals from all pages.			

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Document

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Debtor 1

LILLIAN First Name

GIBSON-DIXON

Case number (if known)

Part 2:	List Others to Be	Notified for a Deb	t That You Airea	dy Listed
you have	Crime to concett hom ve	for any of the debts th:	io someone else, list at vou listed in Part 1	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if , list the additional creditors here. If you do not have additional persons to
NON	ŀΕ			On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Numbe	ς Street		M48.0-1	
Numbe	s Sueer			
				_
City		State	ZIP Code	_
NON	anner productive de la company de la comp	от на при виде на того се стори во се до во до во се на предостава на применения во се на во во се на во се на На поставления на применения на применения на применения на применения на применения на постава на применения	Sections with the let or with appears between love of toward to see the em-	On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			
****				_
City		State	ZIP Code	_
NON	emini eneminantanata saurata harriga enemina, antre elemente autorio elemente de la composição de la composição	india mandra 18 meta 1 meta 1 meta 200 km 201 a tradicio es proposado esta estad proposado est		On which the Done & State
Name	<u> </u>	***************************************		On which line in Part 1 did you enter the creditor? Last 4 digits of account number
				Lust 4 digits of account number
Number	Street			_
				<u></u>
City		State	ZIP Code	_
	t sy transit ant to state the construction of messages in people of suppose the construction in the following			Straphoponi — mengerat mela alamanis sartiga manan papa aminintaksi samani mendenamin dendalagah debada salaman dendalagah saman debada salaman mendenami dendalagah salaman salam
Name				On which line in Part 1 did you enter the creditor?
NONE	=			Last 4 digits of account number 9 5 8 6
Number	Street			_
				_
City		Stati	710.0	_
***************************************	et transferte month e dest de tre divide en de vire i redivine mustement de vigo et viren, et viren i viren de	State	ZIP Code	
NONE Name				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			-
A				
				
City	a Northwest City on Post report of the Synthesis and a decomposition of the System (System System Sy	State	ZIP Code	
NONE				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street	***************************************		
City		State	ZIP Code	

Case 16-19315 Filed 06/13/16 Entered 06/13/16 11:30:33 Desc Main Doc 1 Page 26 of 44 Document Fill in this information to identify your case: LILLIAN GIBSON-DIXON Debtor 1 First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Nonpriority amount amount OCWEN MORTGAGE Last 4 digits of account number 5 1 8 8 \$_28,000.00 \$ \$_28,000.00 When was the debt incurred? 07/05/2005 PO Box 6440 As of the date you file, the claim is: Check all that apply Springfield OH 45501 Contingent State Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? Other. Specify COLLECTION/ CHARGE OF ☐ No Yes DEPT ED / NAVIENT s 108,000.00 s Last 4 digits of account number ,108,000.0 Priority Creditor's Name PO BOX 9635 When was the debt incurred? 03/19/2012 Number As of the date you file, the claim is: Check all that apply **WILKES BARRE** PA Contingent 18773 Unliquidated State ZIP Code Disputed Who incurred the debt? Check one Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated ☑ Other. Specify STUDENT LOAN Is the claim subject to offset? ☐ No ☐ Yes

Case 16-19315 LILLIAN

Debtor 1

er listing any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth. Total claim Priority Nonpriority amount amount
Matthew R. Wildermuth	_ Last 4 digits of account number 1 5 4 9 s 3,950.00 s s 3,950.0
1900 W. 75th St.	
Number Street	When was the debt incurred?
	As of the date you file, the claim is: Check all that apply.
Woodridge IL 60517	☐ Contingent
City State ZIP Code	Unliquidated
***	☐ Disputed
Who incurred the debt? Check one.	
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:
Debtor 1 and Debtor 2 only	Domestic support obligations
At least one of the debtors and another	Taxes and certain other debts you owe the government
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated
Check it this claim is for a community debt	Other. Specify MTG LOAN MODIFICATION
Is the claim subject to offset?	
₩ No	
☐ Yes	
CREDIT MANAGEMENT / 11 WOW	
Priority Creditor's Name	Last 4 digits of account number 0 6 8 7 \$ 220.00 \$ \$ 220.00
4200 INTERNATIONAL	When was the debt incurred? 07/07/2012
Number Street	OTTOTIZOTZ
	As of the date you file, the claim is: Check all that apply.
CARROLLTON TX 75007	☐ Contingent
City State ZIP Code	☐ Unliquidated
Who incurred the debt? Check one.	☐ Disputed
Debtor 1 only	Type of PRIORITY unsecured claim:
Debtor 2 only	
Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government
At least one of the debtors and another	Claims for death or personal injury while you were
Check if this claim is for a community debt	intoxicated
	Other. Specify COLLECTION/ CHARGE OF
s the claim subject to offset?	
☑ No ☑ Yes	
Tes And the control of the second and the control of the second and the second an	
BLITT AND GAINES, P.C.	Last 4 digits of account number 0 7 1 8 s 850.00 s s 850.00
Priority Creditor's Name 661 GLENN AVE	——————————————————————————————————————
umber Street	When was the debt incurred?
	As of the date you file, the claim is: Check all that apply.
A/HEELING II COCC	Manage Control of the
WHEELING IL 60090 State ZIP Code	☐ Contingent ☐ Unliquidated
, and Air Gods	Disputed
Who incurred the debt? Check one.	•
Debtor 1 only	Type of PRIORITY unsecured claim:
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations
■ Debtor 1 and Debtor 2 only ■ At least one of the debtors and another	Taxes and certain other debts you owe the government
	Claims for death or personal injury while you were
Check if this claim is for a community debt	intoxicated ***Collection** CHARGE OF ***Collection** CHARGE OF ***Collection*** Collection** CHARGE OF ***Collection*** Charge OF **Collection*** Charge OF **Collection**
the claim subject to offset?	
l No	
1 Yes	

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Debtor 1

3.	Do any creditors have nonpriority un No. You have nothing to report in the Yes	nis part. Su	ubmit this form to			
4.		d claims in ditor sepa		al order of the creditor who holds each claim. If a creditor had im. For each claim listed, identify what type of claim it is. Do not, list the other creditors in Part 3.If you have more than three not	s more than	
4.1	7=.				Total clai	m
4.1	NATIONAL LEWIS COLLEGE Nonpriority Creditor's Name			Last 4 digits of account number 6 5 8 9	9	000 00
	850 Warrenville Rd			When was the debt incurred?	\$	00.00
	Number Street Lisle	IL	00500	Nacio		
	City	State	60532 ZIP Code	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:		
	Check if this claim is for a commun	nity dobt		 Student loans Obligations arising out of a separation agreement or divorce 		
	Is the claim subject to offset?	nty debt		that you did not report as priority claims		
	No Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify COLLECTION/ CHARGE OFF		
4.2	DIVERSFIED CONSULTANTS	INC / C	OMCAST	Last 4 digits of account number 8 4 5 8	s 5	950.00
	Nonpriority Creditor's Name PO BOX 551268			When was the debt incurred? 01/25/2016	T TO DAY	-
	Number Street JACKSONVILLE, City	FL	32255	As of the date you file, the claim is: Check all that apply.		
	·	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only Debtor 2 only			☐ Disputed		
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
	At least one of the debtors and another			☐ Student loans		
	☐ Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	Is the claim subject to offset? ☑ No ☑ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify CABLE DEBTS		
4.3	PORTFOLIO RECOVERY	TO PACE OF THE WAY BY THE WAY PARTY OF THE P	antiform) de historia de en jumport je ettimoje de mitidoj, kaj time, e en timbolismoj	Last 4 digits of account number _2 _2 _5 _8	ing a second second second record in	uniconductivation of the second of the secon
	Nonpriority Creditor's Name		***************************************	When was the debt incurred?	s3	00.00
	287 INDEPENDENCE Number Street		T-114	Their was the debt incurred?		
	VIRGINIA BEACH	VA	23462	As of the data was fit of		
		State	ZIP Code	As of the date you file, the claim is: Check all that apply.		•
	Who incurred the debt? Check one.			☐ Contingent ☐ Unfiquidated		
	Debtor 1 only Debtor 2 only			Disputed		
	Debtor 1 and Debtor 2 only					
	At least one of the debtors and another			Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a communit	y debt		Student loansObligations arising out of a separation agreement or divorce		;
	Is the claim subject to offset?			that you did not report as priority claims		
	□ No □ Yes			Debts to pension or profit-sharing plans, and other similar debts Other. Specify COLLECTION/ CHARGE OFF		

Debtor 1

Case 16-19315 Doc 1 Filed 06/13/16 Entered 06/13/16 11:30:33 Desc Main LILLIAN DESCRIPTION Page 29 of 44 number (# known) Last Name Name Last Name (# known)

rt 2:	Your NONE	RIORITY	Unsecured	Claims -	 Continuation 	Page
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				140,400,000,000
J LOWES	W-1-1		Last 4 digits of account number 1 5 8 7	s 500.0
Nonpriority Creditor's Name PO BOX 956005			When was the debt incurred? 07/07/2008	<u> </u>
Number Street ORLAND	FL	32896	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check o			Unliquidated	
Debtor 1 only	ne.		☐ Disputed	
Debtor 2 only			Time of MANIMPIANITY	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and a	nother		Student loans	
Check if this claim is for a co	ammunitu dabi	•	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	инивнику цер		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify CREDIT CARD	
☐ No ☐ Yes				
Bill State of the	મો સાંકે નદા દ્વારા પ્રાથમિક તે કરે કે	llyin ta farethar tha this leid which is limite and probably at the state of the Artistania and the State of the		The Control of the State Contr
Brendan Financial Inc			Last 4 digits of account number 1 5 4 9	s 300 C
Nonpriority Creditor's Name				ر اما داد است. اداد اما داد
26 East Ave			When was the debt incurred?	5,000
Number Street , Riverside			As of the date you file, the claim is: Check all that apply.	-1
City	IL State	60546		
	State	ZIP Code	Contingent	
Who incurred the debt? Check on	e.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			a bispated	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and ar	other		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a co	mmunity debt		you did not report as priority claims	
Is the claim subject to offset?			 Debts to pension or profit-sharing plans, and other similar debts Other. Specify COLLECTION/ CHARGE OFF 	
□ No			Other Specify COLLECTION/ CHARGE OFF	
Yes				
entreren in et entreren entreren entreren entreren entreren entre entreren entre entreren entre entre entre en	in version to serve science and production of the state of the serve state of the	રવા અન્ય કે ના લાંક નવાર્તિ ના વર્ષાન્યાના કે લાગ કરાવોકું નવા કુન વર્ષા પ્રાથમિક વીતે ભેટલાનો વર્ષક પણ કેન્યકાન ના કરાકોના ના		\$ 500.00
MONTGOMERY WARD Nonpriority Creditor's Name			Last 4 digits of account number 5 8 9 7	70000000
1112 7th Ave.			When was the debt incurred?	
Number Street				
Monroe	WI	53566	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one	.		Unliquidated	
Debtor 1 only	••		☐ Disputed	
Debtor 2 only			Type of NONDBIODITY was accorded to	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and and	other		Student loans	
☐ Check if this claim is for a con			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	munity dept		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify CREDIT CARD	
□ No				

Debtor 1

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List Others to Be Notified About a Debt That You Already Listed Part 3:

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this	s 1 or
---	--------

AMERICAN HOME SHE	LD		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 860 Ridge Lake Blvd G02	2	-	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Memphis City	TN	38120 ZIP Code	Last 4 digits of account number 6 2 5 8
T- MOBILE Bankruptcy	tere meaning of a	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 53410			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
		W-1	Claims Part 2: Creditors with Nonpriority Unsecured
Bellevue City	WA State	98015 ZIP Code	Last 4 digits of account number 4 1 3 8
JEFFERSON CAPITAL S	YSTEM	S INC.	On which entry in Part 1 or Part 2 did you list the original creditor?
PO Box 953185			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	70.00		Part 2: Creditors with Nonpriority Unsecured
ST. LOUIS	MO State	63195 ZIP Code	Last 4 digits of account number 9 8 9 1
MIDLAND FUNDING LLC	*****	7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	On which entry in Part 1 or Part 2 did you list the original creditor?
2365 NORTHSIDE DR 30	0		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
1184541			Claims Part 2: Creditors with Nonpriority Unsecured
SAN DIEGO City	CA State	92108 ZIP Code	Last 4 digits of account number 5 5 8 7
RELIABLE OFFICE SUPP	LIES	And the transfer of the second se	On which entry in Part 1 or Part 2 did you list the original creditor?
1590 1st Ave.			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Ottawa,	IL State	61350 ZIP Code	Last 4 digits of account number 5 6 8 7
MIDLAND FUNDING LLC	imine, ministry, separations.	Annual states of the statement in Control Statement	On which entry in Part 1 or Part 2 did you list the original creditor?
2365 NORTHSIDE DR 300)		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		. 100-00-	Part 2: Creditors with Nonpriority Unsecured Claims
SAN DIEGO	CA	92108	Last 4 digits of account number 4 4 5 8
CAPITAL ONE BANK	State	ZIP Code	
Name		V7075m1	On which entry in Part 1 or Part 2 did you list the original creditor?
PO BOX6492 Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Older			Claims
CAROL STREAM	IL	60197	
City	State	ZIP Code	Last 4 digits of account number 0 3 6 1

Case 16-19315 Filed 06/13/16 Entered 06/13/16 11:30:33 Desc Main Doc 1 Page 31 of 44 Document Fill in this information to identify your case: LILLIAN GIBSON-DIXON Debtor 1 First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (if known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** Part 1: 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount CHICAGO PATROLMENS CREDIT Last 4 digits of account number 1 5 4 9 \$__2.000.00 \$ \$_2.000.00 When was the debt incurred? 04/24/2015 1359 W. WASHINGTON As of the date you file, the claim is: Check all that apply IL 60607 Contingent ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated Other, Specify COLLECTION/ CHARGE OF ☐ No Yes FIRST PREMIER 420.00 Last 4 digits of account number 420.00 Priority Creditor's Name When was the debt incurred? 04/24/2007 3820 N LOUISE AVE Number As of the date you file, the claim is: Check all that apply SIOUX FALLS SD 57107 Contingent Unliquidated State Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other. Specify COLLECTION/ CHARGE OF Is the claim subject to offset? ☐ No ☐ Yes

Part 1:

Case 16-19315 LILLIAN

Your PRIORITY Unsecured Claims — Continuation Page

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Debtor 1

MABT/CONTFIN					
Priority Creditor's Name	Last 4 digits of account number	s <u>464.00</u>	_ \$	\$ <u></u>	464.(
PO BOX 8099 Number Street	When was the debt incurred? 10/11/2012				
	As of the date you file, the claim is: Check all that apply.				
NEWARK DE 19714	☐ Contingent				
City State ZIP Code	Unliquidated Disputed				
Who incurred the debt? Check one.	□ Disputed				
Debtor 1 only	Type of PRIORITY unsecured claim:				
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations				
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government				
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Other. Specify COLLECTION/ CHARGE OF				
Is the claim subject to offset?	other specify COLLECTION/ CHARGE OF				
□ No □ Yes					
	To the Admitted of a comment of the	d.	in and any investment necessary and any a	A STATE OF THE PROPERTY OF THE	vilaten publikas kyrillen p
Priority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$	
Number Street	When was the debt incurred?				
	As of the date you file, the claim is: Check all that apply.				
	☐ Contingent				
City State ZIP Code	☐ Unliquidated				
Who incurred the debt? Check one,	☐ Disputed				
Debtor 1 only	Type of PRIORITY unsecured claim:				
Debtor 2 only					
Debtor 1 and Debtor 2 only	 Domestic support obligations Taxes and certain other debts you owe the government 				
At least one of the debtors and another	Claims for death or personal injury while you were				
☐ Check if this claim is for a community debt	intoxicated Other. Specify				
s the claim subject to offset?					
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	Last 4 digits of account number	\$	en e	ence-to-encounterprojections	sacenteen en gelegien (
riority Creditor's Name	Last 4 digits of account number	Ψ	p	\$	
umber Street	When was the debt incurred?				
	As of the date you file, the claim is: Check all that apply.				
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ity State ZIP Code	Unliquidated				
Who incurred the debt? Check one.	☐ Disputed				
Debtor 1 only	Type of PRIORITY unsecured claim:				
Debtor 2 only	Domestic support obligations				
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government				
	Claims for death or personal injury while you were				
Check if this claim is for a community debt	intoxicated Other. Specify	ing the transfer of the Constitution of the Co	eller skiegenster i selekt Orenis like skiege (v	elineko kolentropopa oktobi	Alderdistations directors
the claim subject to offset?					
ì No					

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Fill in th	is information to ident	tify your case:			
Debtor	LILLIAN		GIBSON-DIXON		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse If f	filing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for th	ne: Northern District	of Illinois		
Case num	nber				
(If known)					Check if this is an amended filing
					amended ming
Officia	I Form 106G				
		ecutory C	ontracts and	Unexpired Leases	40/47
					12/15
intormatio	on. If more space is ned pages, write your nam	eded, copy the ad-	ditional page, fill it out, n	ogether, both are equally responsible for sur umber the entries, and attach it to this page.	plying correct On the top of any
1 Do vo	bana ami ana ana				
	ou have any executory o. Check this box and file			dules. You have nothing else to report on this fo	rm
☐ Ye	es. Fill in all of the inform	nation below even i	f the contracts or leases a	re listed on Schedule A/B: Property (Official Form	нп. n 106A/B).
				ract or lease. Then state what each contract	
exam	ple, rent, vehicle lease ired leases.	, cell phone). See	the instructions for this for	m in the instruction booklet for more examples o	or lease is for (for f executory contracts and
2 4 A A				and the first of the decision of the state o	ANGLER DIN GOETHAN
Perso	n or company with wh	om you have the	contract or lease	State what the contract or lease is f	or
	V		. • •		
2.1				_	
Name					
Numbe	er Street			_	
City		State 710 Code	· · · · · · · · · · · · · · · · · · ·	~	
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2.2	**				
Name					
Numbe	er Street				
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Name				-	

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Name				-	
Number	r Street		····		
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Debtor 1

LILLIAN First Name

Middle Name

GIBSON-DIXON Last Name

Case number (if known)_

		Additional F	age if You l	Have More C	ontracts or Lease	s
,	Person	or company v	with whom yo	u have the cor	ntract or lease	What the contract or lease is for
2.2	2					
	Name					_
	Number	Street	::01007=1 - 1 - 10 TANTAL		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_
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	Number	Street		***************************************	******	_
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anne and	Name			·····		-
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EII	l in this	information to ident	fy your caso:	oamone rage (
Del	btor 1	LILLIAN First Name	Middle Name	BSON-DIXON Last Name		
,	btor 2	ng) First Name	Middle Name			
				Last Name		
_		• •	e: Northern District of Illino	HS		
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	***************************************		r Codebtors			
and i	number numbe	r the entries in the bo er (if known). Answer have any codebtors?	my responsible for supplication in the left. Attach the every question.	Vina correct intormation	If more space page. On the to	12/15 and accurate as possible. If two married peopl is needed, copy the Additional Page, fill it out, op of any Additional Pages, write your name an
2.	Within t Arizona □ No. □ Yes.	the last 8 years, have , California, Idaho, Lou Go to line 3. . Did your spouse, forn	isiana, Nevada, New Mex	by property state or territorico, Puerto Rico, Texas, Watert live with you at the time	ashington, and \	r property states and territories include Nisconsin.)
		Yes. In which commun	ity state or territory did you	ı live?	Fill in the na	me and current address of that person.
		Name of your spouse, former	spouse, or legal equivalent		- i	
		Number Street	WALLET TO THE PARTY OF THE PART		******	
		City	State	ZIP Code	_	
9	shown i Sc <i>hedu</i>	in line 2 again as a co	debtor only if that perso 6D), <i>Schedule E/F</i> (Offici	n is a guarantor or cosig	ner. Make sure	ise is filing with you. List the person you have listed the creditor on Form 106G). Use <i>Schedule D</i> ,
	Column	1: Your codebtor			Colum	n 2: The creditor to whom you owe the debt
					Checl	call schedules that apply:
3.1						
	Name		······································			chedule D, line chedule E/F, line
	Number	Street				chedule G, line
	City		State			
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	City		State	ZIP Code		

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Debtor 1

LILLIAN First Name

Middle Name

GIBSON-DIXON

Case number (if known)_

		Additional Page to List More Codebtors		
·	4.0	7 1: Your codebtor	Col	umn 2. The creditor to whom you owe the debt
3	NW L		Ch	eck all schedules that apply:
<u> </u>	Name			Schedule D, line
				Schedule E/F, line
	Number	Street		Schedule G, line
	City	State ZIP Code		
3	Name			Schedule D, line
				Schedule E/F, line
	Number	Street		Schedule G, line
	City	State ZIP Code		
3	Name			Schedule D, line
				Schedule E/F, line
	Number	Street		Schedule G, line
	City	State ZIP Code		
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	Name			Schedule E/F, line
	Number	Street		Schedule G, line
Anna and a second	City	State ZIP Code		

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Fill in this	information to identify	/ your case:						
Debtor 1	LILLIAN First Name		ON-DIXON					
Debtor 2	***	Middle Name	Last Name					
(Spouse, if filing	-	Middle Name	Last Name					
Case number		Northern District of Illinois						
(If known)						eck if th	ils is: ended filing	
<u> </u>							-	stpetition chapter 13
Official F	orm 1061					income	as of the following	date:
		ır Income				MM / DD	D/ YYYY	
								12/15
if you are se	orrect information, if y parated and your spoi	ossible. If two married peo ou are married and not filir use is not filing with you, d top of any additional page	ng jointly, and y to not include in	our spo	ouse is living	g with yo	ou, include informati	on about your spouse.
1. Fill in you	r employment				ing the silver	ann Teisin		
informati	on.		Debtor 1	MANUSCO CONTRACTOR STATEMENT		THE ASSESSMENT OF THE PARTY OF	Debtor 2 or non-	filing spouse
attach a se	e more than one job, eparate page with n about additional	Employment status		yed			☐ Employed ☐ Not employed	
Include pa self-emplo	rt-time, seasonal, or							
Occupatio	n may include student aker, if it applies.	Occupation	DAYCARE F	PROVI	DER	······································		
		Employer's name	LOTS OF LU	JV				0-100/M-04-10
		Employer's address	10428 S. INI	DIANA				
			Number Street				Number Street	
								Marian
			CUICACO					
			CHICAGO,	State	IL 606 ZIP Code	28	City	State ZIP Code
		How long employed there	? 16YRS	_			16YRS	
Part 2:	Give Details About	Monthly Income		-				
Estimate n	nonthly income as of	the date you file this form.	If you have noth	ing to re	port for any l	ine, write	s \$0 in the space. Incl	ude your non-filing
spouse uni	ess you are separated. ur non-filing spouse ha	ve more than one employer, tach a separate sheet to this	combine the info					- :
				944	For Debto	or 1	For Debtor 2 or non-filing spouse	
		ary, and commissions (befo calculate what the monthly w		2.	\$800.0	00	\$	
3. Estimate	and list monthly over	time pay.		3. +	- \$ <u>0.6</u>	00	+ \$	
4. Calculate	gross income. Add lin	ne 2 + line 3.		4.	\$ 800.0	00	\$	

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Debtor	1 LILLIAN GIBSON-DIXON First Name Middle Name Last Name		Ca	se number (if kno	wn)	·		***************************************
			For	Debtor 1		otor 2 or		
Co	py line 4 here	→ 4.	\$	800.00	\$	0.00		
5. Lis	t all payroll deductions:							
5a	a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00		
5b	. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00		
50	. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00		
50	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00		
5e	. Insurance	5e.	\$	0.00	\$	0.00		
5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00		
5g	. Union dues		\$	0.00	\$	0.00		
_	Other deductions. Specify:	5g. 5h.		0.00		0.00		
			r \$		+ \$	***************************************		
b. A C	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	0.00	\$	0.00		
7. Ca	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	800.00	\$	0.00		
8. Lis	t all other income regularly received:							
8a	. Net income from rental property and from operating a business, profession, or farm							
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00		
8b	Interest and dividends	8b.	•	0.00	\$	0.00		
8c.	Family support payments that you, a non-filing spouse, or a depende regularly receive		Ψ	. 110 110 10 110 110 110	Ψ	<u> </u>		
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00		
8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00		
8e	. Social Security	8e.	\$	0.00	\$	0.00		
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ce 8f.	\$	0.00	\$	0.00		
8g.	Pension or retirement income	8g.	\$	0.00	¢	0.00		
8h.	Other monthly income. Specify:		+ s	0.00	+\$	0.00		
	d all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	0.00		
	tulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	800.00	\$	0.00	s	800.00
Inclu	e all other regular contributions to the expenses that you list in Schedude contributions from an unmarried partner, members of your household, you do or relatives.			s, your roomn	nates, and o	other	L	
Do r	not include any amounts already included in lines 2-10 or amounts that are r	not av	ailable to	pay expense	s listed in S	chedule J.		
	cify:				_	11. 🛨	\$	0.00
2. Add Write	the amount in the last column of line 10 to the amount in line 11. The repetite that amount on the Summary of Your Assets and Liabilities and Certain St	esult latistic	is the co	mbined month	nly income.	12.	\$	800.00
				, ii ii wipp		1 4 .	Com	bined
	you expect an increase or decrease within the year after you file this fo	orm?					mont	thly income

Yes. Explain:

PRAY THAT BUSINESS WILL PICKUP

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Fill in this information to identi	fy your case:			
Debtor 1 LILLIAN	GIBSON-DIXO	ON		
First Name Debtor 2	Middle Name Last Name	Check if this is	S:	
(Spouse, if filing) First Name	Middle Name Last Name	An amend	_	
United States Bankruptcy Court for the	e: Northern District of Illinois		ent snowing pos as of the followin	tpetition chapter 13
Case number (if known)		MM / DD / Y	YYY	•
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as information. If more space is nee (if known). Answer every question Part 1: Describe Your Ho		ing together, both are equally resp n. On the top of any additional page	onsible for supply es, write your nan	ying correct ne and case number
1. Is this a joint case?				
No. Go to line 2. Yes. Does Debtor 2 live in a	separate household?			
No Pes. Debtor 2 must	file Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
Do you have dependents? Do not list Debtor 1 and Debtar 2.	☐ No ✓ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Debtor 2. Do not state the dependents'	each dependent	SON	13	□ No ✓ Yes
names.		DALICUTED	•	■ Yes
		DAUGHTER	9	☑ Yes
				□ No
			-	Yes
			AND THE STATE OF T	U No □ Yes
				□ No
			 	Yes
 Do your expenses include expenses of people other than yourself and your dependents? 	✓ No ☐ Yes			
Part 2: Estimate Your Ongo	ing Monthly Expenses			
Estimate your expenses as of you expenses as of a date after the ba applicable date.	r bankruptcy filing date unless you a nkruptcy is filed. If this is a suppleme	re using this form as a supplement ental Schedule J, check the box at t	in a Chapter 13 c	ase to report n and fill in the
	n-cash government assistance if you			en e
	d it on Schedule I: Your Income (Offic	•	Your expe	nses
4. The rental or home ownership any rent for the ground or lot.	expenses for your residence. Include	first mortgage payments and 4	. \$ <u> </u>	1,000.00
If not included in line 4:				
4a. Real estate taxes		4	a. \$	0.00
4b. Property, homeowner's, or i		4	b. \$	0.00
4c. Home maintenance, repair,		4	с. \$	0.00
4d. Homeowner's association of	r condominium dues	4	d. \$	0.00

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Debtor 1

LILLIAN GIBSON-DIXON
First Name Middle Name Last Name

Case number (if known)_____

			Your expenses	
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	170.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d. Other Specify:	6d.	\$	0.00
7		7.	\$	500.00
8	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$ \$	50.00
10.	Personal care products and services	10.	\$	100.00
11.	Medical and dental expenses	11,	\$	0.00
12.	The state of the s		\$	150.00
40	Do not include car payments.	12.	Ψ	
13.	and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	60.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a,	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other, Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debto	or 1 LILLIAN GIBSON-DIXON First Name Middle Name Last Name	Case number (if known)	
21. C	Other. Specify:	21.	+\$ 0.00
22. C	alculate your monthly expenses.		
22	2a. Add lines 4 through 21.	22a.	\$2,230.00
22	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2 22b.	\$0.00
22	2c. Add line 22a and 22b. The result is your monthly expenses.	22c.	\$2,230.00
23. Ca l	culate your monthly net income.		
23a	Copy line 12 (your combined monthly income) from Schedule I.	23a .	\$1,168.00
23b	Copy your monthly expenses from line 22c above.	23 b.	-\$2,230.00
23c	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	s1,062.00
4. Do	you expect an increase or decrease in your expenses within the ye	ear after you file this form?	
For	example, do you expect to finish paying for your car loan within the yeartgage payment to increase or decrease because of a modification to the	r or do you expect your	
	No		
Ø.	Yes. Explain here: HOPEFUL THAT BUSINESS PICKS U	Р	
		·	

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			Document	Paye 42 01 44	
ill in this in	nformation to ide	ntify your case:			
Nobbon 4	LILLIAN		CIRCON DIVON		
Debtor 1	First Name	Middle Name	GIBSON-DIXON Last Name		
ebtor 2 pouse, if filing)) First Name	Middle Name			
			Last Name	1	
		rthe: Northern District	t of Illinois		
ase number known)					
					Check if this is a
					amended filing
Officia	I Form 106	iDec			
	····				
Decl	aration	About ar	n Individua	l Debtor's Schedules	12/15
					12/15
two marr	ied people are fil	ing together, both a	re equally responsible fo	or supplying correct information.	
htaining r	money or propert	the feated in annual	-ti	nded schedules. Making a false statement, con	cealing property, or
rooms on b	ath 40 HOO CC	y by traud in connet	ction with a bankruptcy of	case can result in fines up to \$250,000, or impris	sonment for up to 20
ears, or o	otn. 18 U.S.C. 99	152, 1341, 1519, and	d 3571.		•
en e					
	Sign Below				
est (Managera					
Did you	pay or agree to	pay someone who is	s NOT an attorney to help	you fill out bankruptcy forms?	
₩ No					
Yes.	Name of person			Attach Bankruptcy Petition Preparer's Notice, Dec	daration and
				Signature (Official Form 119).	iaration, and
				Organica (Onicial Fulls) 179).	
Under po	enalty of perjury,	I declare that I have	e read the summary and	schedules filed with this declaration and	
Under po	enalty of perjury, y are true and coi	I declare that I have rect.	e read the summary and	schedules filed with this declaration and	
Under pothat they	enalty of perjury, y are true and cor	I declare that I have rect.	e read the summary and	schedules filed with this declaration and	
Under pothat they	enalty of perjury, y are true and cor	I declare that I have rect.	e read the summary and	schedules filed with this declaration and	
Under pothat they	enalty of perjury, y are true and cor	I declare that I have rect.	e read the summary and	schedules filed with this declaration and	
Pul	enalty of perjury, y are true and con	I declare that I have rect.	_ x		
Pul	la Ab	I declare that I have rect.			
Pul	la Ab	I declare that I have rect.	Signature of De		
Pul	la Ab	I declare that I have rect.	_ x	ebtor 2	

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Fill in this in	formation to ide	ntify your case:		
Debtor 1	LILLIAN		GIBSON-DIXON	
D-14 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	P7.7144
United States I	Bankruptcy Court fo	r the: Northern District of II	linois	
Case number (If known)		44000		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims

 For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form information below. 			
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's name: CHASE MTG	☐ Surrender the property.		
	Retain the property and redeem it.	Yes	
Description of property SFR SFR	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]: MY HM WERE MY FAMILY AND I LIVE	-	
Creditor's name:	☐ Surrender the property.	□ No	
Description of	Retain the property and redeem it.	Yes	
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's name:	☐ Surrender the property.	□ No	
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's name:	□ Surrender the property.	No	
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	100	
	Retain the property and [explain]:		

this is an

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LI	L	LI	Α	N
	-		•	• •

GIBSON-DIXON

Case number (If known)__

Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G
fill in the information below. Do not list real actate losses. Unavaired leaves and Unexpired Leaves (Official Form 106G
fill in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet
ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

		□ No
Description of leased property:		☐ Yes
essor's name:		□ No
Description of leased roperty:		Yes
essor's name:		☐ No
escription of leased roperty:		Yes
essor's name:		□No
escription of leased openty:		Yes
essor's name:		□ No
escription of leased operty:		Yes
essor's name:	manus markan manus kanaba mengangga padang sepanangan pagan kanaban sepanangan pagan paga	No
escription of leased operty:		Yes
ssor's name:		
escription of leased operty:	en e	☐ Yes
		omen a strend all and the per limited annual less provides are performed annual person annual formation annual annual accessor.
3: Sign Below		
	indicated my intention about any property of my estate th	at secures a debt and any
er penalty of perjury, I declare that I have conal property that is subject to an unexpi	, va 10030.	
er penalty of perjury, I declare that I have conal property that is subject to an unexpi	*	